UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB Number:

+3235-0076April 30, 2008

Expires: Estimated average burden



UNIFORM LIMITED OFFERING EXEM	FIION.	· ·
Name of Offering Check if this is an amendment and name has changed, and indicate change.)		
Private Placement of \$17,737,500 in limited partnership interests in GTCR Co-Inve	st III, L.P.	•
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule	506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment		
A. BASIC IDENTIFICATION DATA		·
Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)		
GTCR Co-Invest III, L.P.		
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including A	Area Code)
6100 Sears Tower, Chicago, IL 60606	(312) 382-2200 /	
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including A	Area Code)
(if different from Executive Offices)	l · · / · ·	
	<u> </u>	
Brief Description of Business	,,,	
Private equity fund formed for the purpose of acquiring companies.	\\rangle	PROCESSE
Type of Business Organization		JAN 1 6 2007
corporation Imited partnership, already formed	other (please specify):	JAN 1 6 and
business trust limited partnership, to be formed		2007
Month Year		THOMSON
Actual or Estimated Date of Incorporation or Organization: 0 6 0 6		THOMSON FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation f		WUVCIAL
CN for Canada; FN for other foreign jurisdiction)	DE	
· · · · · · · · · · · · · · · · · · ·		
GENERAL INSTRUCTIONS		
GENERAL INSTRUCTIONS Federal:		

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENTII	FICATION DATA .	•						
2. Enter the information requ	ested for the following	ng:								
Each promoter of the is:	suer, if the issuer has	been organized within the	past five years;							
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;										
Each executive officer a	and director of corpo	rate issuers and of corporat	e general and managing part	tners of partnership	p issuers; and					
Each general and managing partner of partnership issuers.										
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	Director	☑ General and/or Managing Partner					
Full Name (Last name first, if	individual)									
GTCR Golder Raune	r II, L.L.C. (Ger	neral Partner of the Iss	suer)							
Business or Residence Address	(Number and Street	t, City, State, Zip Code)								
6100 Sears Tower, C	hicago, IL 6060	6 -								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)									
		Golder Rauner II, L.	L.C.)							
Business or Residence Address										
6100 Sears Tower, C										
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)									
		R Golder Rauner II, I	(I.C)							
Business or Residence Address	<u>.</u>		3.2.0.)							
6100 Sears Tower, C										
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)		-							
Donnini, David A. (F	rincipal of GTC	R Golder Rauner II, I	L.C.)							
Business or Residence Address										
6100 Sears Tower, C										
Check Box(es) that Apply:	Promoter	Beneficial Owner		☐ Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)		······································							
		ncipal of GTCR Gold	ler Rauner II, L.L.C.)							
Business or Residence Address										
6100 Sears Tower, C										
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)		····							
		Golder Rauner II, L.I	L.C.)							
Business or Residence Address		****								
6100 Sears Tower, C	hicago, IL 60606	5								
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)			<u> </u>						
Bondy, Craig A. (Pri	ncipal of GTCR	Golder Rauner II, L.I	C.)							
Business or Residence Address			· · · · · · · · · · · · · · · · · · ·	 -						
6100 Sears Tower, C	hicago, IL 60606	5								

		<u> </u>		<u> </u>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Hemmer, Vincent J.	(Principal of G1	CR Golder Rauner II	I, L.L.C.)	•	
Business or Residence Address			· · · · · · · · · · · · · · · · · · ·		·
6100 Sears Tower, C	hicago, IL 6060	06	The state of the s		•
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer .	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)			•	
Randell, David F. (Pr	rincipal of GTC	R Golder Rauner II, L	L.C.) *		
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			
6100 Sears Tower, C	hicago, IL 6060)6	1		<u> </u>
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Roche, Collin E. (Pri	ncipal of GTCR	Golder Rauner II, L.	L.C.)		
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			
6100 Sears Tower, C	hicago, IL 6060	16			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	ndividual)	<u></u>			
Katz, David S. (Princ	ipal of GTCR C	Golder Rauner II, L.L.	C.)		
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			
6100 Sears Tower, C	hicago, IL 6060	6			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Yih, Daniel W. (Chie	f Operating Off	icer of GTCR Golder	Rauner II, L.L.C.)		
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
6100 Sears Tower, C	hicago, IL 60 <u>60</u>	6			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Trala, Anna May L. (Chief Financial	Officer of GTCR Go	lder Rauner II, L.L.C.)		
Business or Residence Address			<u> </u>		•
6100 Sears Tower, Cl	hicago, IL 6060	6			

	· ·					<u>i</u> -		· · ·		·		
				В.	INFORM	ATION AB	OUT OFFE	RING	•	<u> </u>		<u> </u>
						1					Yes	No
1. Has	the issuer	sold, or doe	s the issue	r intend to	sell, to nor	-accredite	d investors	in this offe	ring?		, 🛛	
			, .A	nswer also	o in Appen	dix, Cołum	n 2, if filin	g under UL	OE.			
2. Wh	at is the mi	nimum inve	estment tha	t will be a	ccepted fro	m anv indi	vidual?				\$7.500	
• .	!			est est					,		, ,	•
1 Dos	ic the offeri	na namit i	oint owners	hin of a c	inala vait?					•	Yes	No
e 5						1.	·:······	, , ,	······································	' ,	🛛	
4 Ente	er the infon	nation requ	iested for e	ach persor	who has b	een or will	be paid or connection	given, dire	ctly or indi	rectly, any		
							broker or d					•
and	or with a s	ate or state	s, list the n	ame of the	broker or	dealer. If n	ore than fi	ve (5) perso	ons to be li	sted are		-
				<u>-</u>	ou may set	forth the in	nformation	for that bro	ker or deal	er only.		·
Full Na	ame (Last n	ame first, i	findividual	()		1.	•	•	•			
D	D 1		AI I				1 3	• '-		<u> </u>	•	•
Busine	ss or Resid	ence Addre	ss (Number	r and Stree	et, City, Sta	ite, Zip Coo	ie)		•			•
Name (of Associate	d Broker o	r Dealer	a.	•	•	·					
rvaric v	. Associati	d Bloker e	n Dealer	. * * .		,						
States i	n Which Po	erson Listee	l Has Solic	ited or Int	ends to Sol	icit Purcha	sers ·				•	*.
			eck individ						•••••		🔲 AI	1 States
[AL]	'[AK]	[AZ] ⁻	[AR]	[CA]	[CO] ·	[CT]	[DE]	[DC]	[FL] .	[GA]	[HI]	[ID]
[IL]	: [IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA] .	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	· [SC]	[SD]	[TN]	[TX]	[UT]	[VT] ([VA]	[WA]	[WV]	[WI].	[WY]	· [PR] ·
Full Na	ıme (Last n	ame first, i	findividual)		İ		•				
					· · · · ·	†			•			
Busine	ss or Reside	nce Addre	ss (Number	and Stree	t, City, Sta	te, Zip Coo	le)					
	<u>.</u>	<u>. </u>	•									•
Name o	of Associate	d Broker o	r Dealer									
Ctataa	- Whish D		I Has Calini			inia Dunnaha						
			l Has Solici ck individu				sers 				🛮 Al	l States
(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL)	[MC]	(IA)	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[0A] [MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt.	\$ 0	\$0
Equity	\$0	\$0
☐ Common ☐ Preferred	• .	
Convertible Securities (including warrants)	\$ 0	\$0
Partnership Interests	\$17,737,500	\$ 17,737,500
Other (Specify)	\$0	\$0
Total	\$17,737,500	\$17,737,500
Answer also in Appendix, Column 3, if filing under ULOE.	311,737,300	\$17,757,500
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
	Investors	of Purchases
Accredited Investors	53	\$16,890,000
Non-accredited Investors	18	\$847,500
Total (for filings under Rule 504 only)	N/A	\$N/A
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Type of	Dollar Amount
Type of Offering	Security	Sold
Rule 505	N/A	\$N/A
Regulation A	N/A	\$N/A
	N/A	\$N/A
Rule 504		JIVA
Rule 504	N/A	\$N/A
	N/A	•
Total		•
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		\$N/A
Total	\text{\tinx{\text{\tinx{\text{\texi{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\text{\tetx{\text{\text{\text{\text{\text{\text{\text{\texi}\text{\text{\ti}\tint{\text{\text{\text{\text{\text{\tin}\text{\text{\text{\ti}\tint{\text{\text{\text{\texi}\tint{\text{\texit{\text{\texi}\text{\text{\texi}\text{\texit{\texi}\text{\texitt{\texit{\text{\ti}\tint{\text{\texit{\text{\texi}\tint{\text{\texi}\text{\	\$N/A \$0
Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs.	\(\times \)	\$N/A \$0 \$5,000
Total		\$0 \$5,000 \$50,000
Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees.		\$N/A \$0 \$5,000 \$50,000 \$10,000
Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees. Printing and Engraving Costs. Legal Fees. Accounting Fees. Engineering Fees.		\$0 \$5,000 \$50,000 \$10,000 \$0

	C. OFFERING	PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF	PROCEEDS		
b.	and total expenses furnished in respons	gate offering price given in response to Part C – Quest e to Part C – Question 4.a. This difference is the "adju	sted		\$17	,637,500
5.	for each of the purposes shown. If the a check the box to the left of the estimate	sted gross proceeds to the issuer used or proposed to amount for any purpose is not known, furnish an estinate. The total of the payments listed must equal the a response to Part C – Question 4.b above.	ate and			
	· ,			Payments to Officers, Directors & Affiliates		Payments To Others
	Salaries and fees		\boxtimes	\$0	\boxtimes	\$0
	Purchase of real estate		\boxtimes	\$0	\boxtimes	\$0
	Purchase, rental or leasing and insta	allation of machinery and equipment	\boxtimes	\$0	\boxtimes	\$0
	Construction or leasing of plant bui	ldings and facilities	\boxtimes	\$0	\boxtimes	\$0
	offering that may be used in exchar	cluding the value of securities involved in this age for the assets or securities of another issuer	Ø	\$ 0	Ø	\$17,562,500
	- ,		⋈	\$0	⋈	\$0
	· ·					
				\$0		\$75,000
	Otner (specify):		\boxtimes	<u>\$0</u>	×	\$0
			П	**		**
			⊠	\$0		\$0
			\boxtimes	\$0	⊠	\$17,637,500
	Total Payments Listed (column total	ıls added)			7,637	,500
		D. FEDERAL SIGNATURE		<u></u>		
sign	ature constitutes an undertaking by the i	signed by the undersigned duly authorized person. If the sum of the U.S. Securities and Exchange Con-accredited investor pursuant to paragraph (b)(2) of	ommiss	ion, upon written r		
Issu	er (Print or Type)	Signature	_	Date		
GTO	CR Co-Invest III, L.P.	12/15/		November 27,	2006	
	ne of Signer (Print or Type)	Title of Signer (Print or Type)				
Edg	ar D. Jannotta, Jr.	Managing Principal of GTCR Golder Rauner II, L.	L.C., the	e general partner of	f the I	ssuer

-ATTENTION-

	E. STATE SIG	NATURE			
1. Is any party described in 17 CFR 230.262 of such rule?		f the disqualification pro	visions	Yes □	No ⊠
	See Appendix, Column 5	, for state response.			
2. The undersigned issuer hereby undertakes Form D (17 CFR 239.500) at such times a		ninistrator of any state in	which this notice is	filed, a noti	ice on
3. The undersigned issuer hereby undertake issuer to offerees.	es to furnish to the state ac	łministrators, upon writt	en request, informati	on furnish	ed by the
4. The undersigned issuer represents that the Limited Offering Exemption (ULOE) of of this exemption has the burden of estable	the state in which this notic	e is filed and understand			
The issuer has read this notification and knoundersigned duly authorized person.	ows the contents to be true	and has duly caused this	s notice to be signed	on its beha	alf by the
Issuer (Print or Type)	Signature		Date		
GTCR Co-Invest III, L.P.	2/-1)	72	November: 27	2006	
Name (Print or Type)	Title (Print or Type)	- V			

Managing Principal of GTCR Golder Rauner II, L.L.C., the general partner of the Issuer

Instruction:

Edgar D. Jannotta, Jr.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend	to sell ccredited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		Disquali under Sta (if yes, explana waiver g (Part E-	fication te ULOE attach ition of granted)			
				Number of Accredited		Number of Non-Accredited	. .		
State	Yes .	No .		Investors	Amount	Investors	Amount	Yes	No
AL		⊠ .	-0- "	-0- "	-0- ° :	-0-	-0-		⊠
AK		Ø	-0-	-0-	-0-	-0-	-0-	· 🗆	Ø
AZ		Ø	\$250,000 in limited partnership interests	1	\$250,000	-0-	-0-		⊠
AR		⊠	-0-	-0-	-0-	-0-	-0-		Ø
CA		⊠	\$450,000 in limited partnership interests	2	\$450,000	-0-	-0-		Ø
СО		Ø	· -0-	-0-	-0-	-0-	-0-		Ø
СТ		⋈	\$300,000 in limited partnership interests	ł	\$300,000	-0-	-0-		⊠
DE		⊠	-0-	-0-	-0-	-0-	-0-		⊠
DC		⋈	\$350,000 in limited partnership interests	2	\$350,000	-0-	-0-	. 🗆	⊠
FL		Ø	\$1,750,000 in limited partnership interests	7	\$1,750,000	-0-	-0-		⊠
GA		⋈	\$300,000 in limited partnership interests	1	\$300,000	-0-	-0-		Ø
НІ		Ø	\$300,000 in limited partnership interests	1	\$300,000	-0-	-0-		Ø
ID		⋈	-0-	-0-	-0-	-0-	-0-		Ø
IL	⊠		\$6,357,500 in limited partnership interests	12	\$5,540,000	17	\$817,500		Ø
îN	☒		\$30,000 in limited partnership interests	-0-	-0-	1	\$30,000		⊠
IA		☒	-0-	-0-	-0-	-0-	-0-		⊠
KS		⊠	-0-	-0-	-0-	-0-	-0-		Ø
KY		⋈	-0-	-0-	-0-	-0-	-0-		Ø
LA	0	Ø	-0-	-0-	-0-	-0-	-0-		Ø
МЕ		⋈	-0-	-0-	-0-	-0-	-0-		Ø
MD		Ø	\$500,000 in limited partnership interests	1	\$500,000	-0-	-0-		☒
МА		⊠	\$300,000 in limited partnership interests	1	\$300,000	-0-	-0-		⊠
MI		Ø	-0-	-0-	-0-	-0-	-0-		፟፟፟፟
MN		⊠	\$300,000 in limited partnership interests	1	\$300,000	-0-	-0-		Ø

APPENDIX

1	· ·	2	3		4			5 Disquali	
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
				Number of		Number of Non-		,	
State	Yes	No		Accredited Investors	Amount	Accredited Investors	Amount	Yes	No
MS	_ ·	Ø	-0	-0-	-0-	0-	-0-	. 🗆	Ø
МО		Ø	-0-	-0-	-0-	-0-	-0-		Ø
МТ		×	-0-	-0-	-0-	-0-	-0-		×
NE		Ø	-0-	-0-	-0-	-0-	-0-		Ø
NV		×	-0-	-0- ;	-û-	-0-	0 .		⊠
NH		Ø	-0-	-0-	-0-	-0-	-0-		Ø
NJ		Ø	\$600,000 in limited partnership interests	2	\$600,000	-0-	-0-		Ø
NM		⊠	-0-	-0-	-0-	-0-	-0-		⊠
NY		⊠	\$300,000 in limited partnership interests	l	\$300,000	-0-	-0-		⊠
NC		⊠	\$300,000 in limited partnership interests	1	\$300,000	-0-	-0-		⊠
ND		Ø	-0-	-0-	-0-	-0-	-0-		Ø
ОН		☒	-0-	-0-	-0-	-0-	-0-		⊠
ОК		Ø	\$300,000 in limited partnership interests	1	\$300,000	-0-	-0-		Ø
OR		⊠	-0-	-0-	-0-	-0-	-0-	. 🗆	Ø
PA	0	Ø	\$400,000 in limited partnership interests	2	\$400,000	-0-	-0-		Ø
RI		⊠	-0-	-0-	-0-	-0-	-0-		Ճ
SC		⊠.	\$300,000 in limited partnership interests	1	\$300,000	-0-	-0-		☒
SD		Ø	-0-	-0-	-0-	-0-	-0-		⊠
TN		Ø	\$2,050,000 in limited partnership interests	7	\$2,050,000	-0-	-0-		Ø
TX	0	Ø	\$1,400,000 in limited partnership interests	5	\$1,400,000	-0-	-0-		☒
UT		⊠	\$300,000 in limited partnership interests	1	\$300,000	-0-	-0-		Ø
VT		Ø	-0-	-0-	-0-	-0-	-0-		Ø
VA		Ø	\$600,000 in limited partnership interests	2	\$600,000	-0-	-0-		
WA		Ø	-0-	-0-	-0-	-0-	-0-		Ø
wv		⊠	-0-	-0-	-0-	-0-	-0-		×

APPENDIX

1		2	3		-, 4		•	- 5	
	to non-a	to sell ccredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	,	Type of in amount purch	ased in State		Disquali under Sta (if yes, explana waiver g (Part E-	te ULOE attach tion of ranted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
WI		⊠	-0-	-0-	-0-	-0-	-0-		⊠
WY		⊠	-0-	-0-	-0-	-0-	-0-		Ø
PR		⊠	-0-	-0-	-0-	,-0-	-0-		⊠